Congenital Absence of the Gallbladder

IN CALIFORNIA MEDICINE for December 1956, Monroe and Ragen report a case of congenital absence of the gallbladder and review of the literature.

Kaufman, in his three-volume work on pathology, translated by Stanley Reiman of Philadelphia and published about 1929, states that congenital absence of the gallbladder is rare and that he had personally seen two cases.

I have seen two such cases, both in women. One case I saw at operation for a supposedly nonfunctioning gallbladder, the other at autopsy. That is an incidence of one case in more than 16,000 autopsies performed by me. I have forgotten where, but many years ago I read that the incidence is about 1:14,000.

To my personal knowledge, the late Dr. A. F. Wagner, chief autopsy surgeon to the Coroner, Los Angeles County, performed about 13,000 autopsies during the years 1929 to 1937 and found no case of congenital absence of the gallbladder during that period.

One cannot deny what the literature cited by Monroe and Ragen says, but I cannot believe that it presents the true picture. The over-all incidence cited is 1:1,070. The range is from 1:5,000 to 1:270. Many busy pathologists have never seen a case. I can think of few things which are so uniformly ignored in textbooks on anatomy and pathology as congenital absence of the gallbladder. When mentioned at all it is merely mentioned in passing.

It is high time that anatomists and pathologists report such cases and give incidence. In this connection the fact that one person does 1,000 autopsies and finds two such cases means nothing. He may perform twenty thousand more without seeing another. Large series by very busy services over a period of years should give some reliable figures.

How many surgeons have ever seen such a case? If such cases are as frequent as the figures cited by Monroe and Ragen would indicate, hospital records should be full of them.

JOHN H. SCHAEFER, M.D.

Los Angeles

Dr. Schaefer's letter was referred to the senior author of the case report in question, who replied:

In reviewing the literature, it occurred to us that the apparent incidence of congenital absence of the gallbladder seemed quite high, on the basis of reported cases. However, we could report only what we found since there seemed to be no statistical data to support our impression. I fully agree with Dr. Schaefer that to arrive at the incidence of a rare anomaly, it is necessary to have an extremely large statistical sample, and the rarer the lesion the greater the need for a large sample.

In conclusion, then, we agree with Dr. Schaefer that the real incidence of congenital absence of the gallbladder is probably considerably less than 1:1,070 but would like to emphasize that we were merely reporting the literature as we found it. The senior author plans to carry out a more embracing statistical study of this anomaly.

STANLEY EDWIN MONROE, M.D.